NO. 9325

OCT 2 1 2004

PTO/SB/122 /09-04

Approved for use through 07/31/2006, CAE 0651-0035
U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it displays a valid CMB control number. 10/828,649 **Application Number** CHANGE OF 4/21/2004 CORRESPONDENCE ADDRESS Filing Date £1,134 Application Lu et al. First Named Inventor را ب . . . Art Unit Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 14689 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with **7 Customer Number:** 000293 OR Firm or Individual Name Address City State Zip Country Telephone This form cannot be used to change the data associated with a Customer Number. To change the

data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the:

**Applicant/Inventor** 

Assignee of record of the entire interest, Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

Attorney or agent of record. Registration Number 28888

Registered practitioner named in the application transmittel letter in an application without an executed each or declaration. See 37 CFR 1.33(a)(1). Registration Number

Signature

Typed or Printed Ralph A. Dowell Name

Telephone, 703 415 2555 Data 9/21/04

NOTE: Signatures of all the inventors or exploress of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

| لبيا | *Total of                 | formp are submitte   | ed.                 |                       |                    |                  |          |
|------|---------------------------|----------------------|---------------------|-----------------------|--------------------|------------------|----------|
| This | collection of information | is regulated by 37 ( | CFR 1.33. The Infor | metion is required to | obtain or retain a | benefit by the p | ublic wi |

high is to file (and by the USPTO This collection of imminister is insignated by 37 CFR 1.13 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggressions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO Trids ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistance in completing the form, call 1-800-PTO-9199 and select option 2.